

DO/EO BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 402010	RECEIPT DATE:	09 / 28 / 99
IA NUMBER:	PCT/ IB98 / 01813	IA FILING DATE:	11 / 13 / 98
FAMILY NAME:	COE	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	JOTHAM WADSWORTH	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	12 / 31 / 97
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	PC10030A	COUNTRY:	IBX
CORRESPONDENCE NAME/ADDRESS:	CUSTOMER NUMBER:	TELEPHONE	
		FAX	
NAME:	PAUL H GINSBURG		
	PFIZER INC		
STREET:	235 EAST 42ND STREET		
CITY:	NEW YORK		
STATE/COUNTRY:	NY	ZIP:	100175755
EMAIL:			
APPLICATION TITLES:			
	ARYL FUSED AZAPOLYCYCLIC COMPOUNDS		

TAB TO LAST POSITION,PUSH SEND

SERIAL NUMBER	FILING DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
09/402,010	09/28/99	514	1614	PC10030A

APPLICANT

JOTHAM WADSWORTH COE, NIANTIC, CT; PAIGE ROANNE PALMER BROOKS,  
NORTH STONINGTON, CT.

**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***  
WHICH CLAIMS BENEFIT OF 60/070,245 12/31/1997

BC

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED THIS APPLN IS A 371 OF PCT/IB98/01813 11/13/98

BC

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***  
VERIFIED

NONE BC

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 01/13/00

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	<input type="checkbox"/> Met after Allowance	STATE OR COUNTRY	SHEETS DRAWING	TOTAL CLAIMS	INDEPENDENT CLAIMS
Verified and Acknowledged	<u>BC</u>		CT	0	14	4
Examiner's Initials		Initials				

ADDRESS

PAUL H GINSBURG  
PFIZER INC  
235 EAST 42ND STREET  
20TH FLOOR  
NEW YORK NY 10017-5755

TITLE

ARYL FUSED AZAPOLYCYCLIC COMPOUNDS

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT NO. _____ for the following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit _____
\$918		